

Attachment 15

Experimental Study of Cigarette Warnings: Study 2 Report

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- whether the warning was recalled ("*Recall*").

Overview of Statistical Analyses: Analyses compared the responses from participants in each of the treatment conditions to responses from participants in the control condition (i.e., average of the 4 Surgeon General's warnings). These analyses examined whether, relative to viewing a Surgeon General's warning, viewing a cigarette health warning resulted in statistically significantly higher levels of the outcomes measured (e.g., *New information*, *Self-reported learning*). For the change in health beliefs over the sessions these analyses examined whether, relative to changes in level of agreement with the health belief statements between session for those participants in the control condition, the difference between sessions was larger for those participants in each of the treatment conditions (cigarette health warnings).

Summary of Results: In general, the vast majority of the new cigarette health warnings tested showed statistically significant effects across the outcomes measured, as compared to the current Surgeon General's warnings. Participants were significantly more likely, relative to the control condition (i.e., the Surgeon General's warnings), to report that for 13 of the 16 cigarette health warnings tested (except for Addictive, Kill you, and Quit now): the new cigarette health warnings provided *new information*, were higher on *self-reported learning*, and that the new cigarette health warnings were higher on *perceived informativeness*. Participants in nearly all cigarette health warning conditions (15 of 16) were significantly more likely, relative to the control condition, to rate the warnings as higher on *Perceived Understandability* (except for Quit now) and to report that the warnings were higher on *Perceived helpfulness understanding health effects* (except for Addictive). Similarly, participants in 14 of the 16 cigarette health warning conditions rated these warnings statistically significantly higher on *thinking about risks* (except for Addictive and Quit now), relative to the control condition. All warnings (new cigarette health warnings and current Surgeon General's warnings) were rated as factual by the vast majority of participants. However, half of the cigarette health warnings (8 of 16) were rated as lower on *Perceived Factualness* relative to the control condition, the other half of the half of the cigarette health warnings were rated similar on *Perceived Factualness* relative to the control condition. Participants in all 16 cigarette health warnings conditions were more likely, relative to participants in the control condition, to report that the warning they viewed would attract *attention*. Participants in all 16 cigarette health warnings conditions were more likely to be accurately *recall* which warning they had seen than were participants in the control condition. As for changes in *health beliefs*, between Session 1 and Session 2 (approximately 1-2 days apart), 11 cigarette health warnings resulted in greater net positive changes in participants' agreement with health belief items linking smoking to a specific health consequence, and between Session 1 and Session 3 (approximately 15-16 days apart), 7 cigarette health warnings resulted in greater net positive changes in agreement with *health beliefs*.